

Account Activation

Introduction

This section of the document will show how an authorized user can activate an existing employer account with DUA. The set of instructions here are applicable to employers registered with DUA before December 7, 2009 and have received a correspondence via U.S. mail about activating their account in the QUEST system. The instructions here will not be applicable if you are a new employer registering with DUA for the first time.

IMPORTANT: The person completing the account activation for the UI employer account will be the System Administrator by default and will have access to all information in the employer's account. This means the system administrator will be able to view information, make changes, complete transactions, and give online access to other users in this account. Therefore, the person chosen by the employer to activate the account should be a highly trusted employee

Step-by-Step Instructions:

1. Go to the following web page to begin account activation – www.mass.gov/uima
2. Click on the link 'Employer Login'.
3. The following page will appear. Click on the link 'Account Activation'.

Massachusetts Department of Workforce Development

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Logon * Indicates Required Field

Massachusetts Division of Unemployment Assistance : Employer Login

To access Employer account information, enter your User ID and Password. For purposes of authentication, using your Password is considered the same as using your signature.

User ID: *

Password: *

[Login](#) [Forgot Password](#)

Helpful Resources Home

[Employer Registration](#)
Create a new employer account to obtain an Employer Account Number and create System Administrator user.

[What's New](#)
Items of current interest - law changes, etc.

[System Availability](#)
Check routine and special system downtimes.


[User Guide](#)
A guide to using t

[Returning Employer](#)


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Click here


4. The following page will appear. Enter your employer account number and the password received in the mail. Click 'Next' to continue.

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<div style="text-align: right;">* Indicates Required Field</div>	
Logon Employer Registration What's New System Availability User Guide Returning Employer Account Activation	<div style="background-color: #4F81BD; color: white; padding: 5px;">Activate Your Account</div> <p>You can activate your account by completing just a few quick steps. To begin, enter your Employer Account Number(EAN) and the Activation Password you received and select 'Next'</p> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>Employer Account Number(EAN):</div> <div><input style="width: 150px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Activation Password:</div> <div><input style="width: 150px;" type="password"/></div> </div> </div> <div style="text-align: center; margin-top: 10px;"> <input type="button" value="Next"/> </div>

5. The following page will appear. Read the information displayed and click 'Next' to continue.

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<div style="text-align: right;">* Indicates Required Field</div>	
Logon Employer Registration What's New System Availability User Guide Returning Employer Account Activation	<div style="background-color: #4F81BD; color: white; padding: 5px;">Employer Information</div> <div style="display: flex; justify-content: space-between; margin-bottom: 10px;"> <div>Employer Account Number XXXX</div> <div>Employer Name: XXXX</div> </div> <div style="background-color: #4F81BD; color: white; padding: 5px;">Welcome to UI Employer Account Activation!</div> <p>Employers who pay wages within Massachusetts are required to register with and report quarterly wage data to this Agency. This activation process will create your new online DUA account.</p> <p><i>Please note that not completing the activation process could result in the loss of entered data.</i></p> <div style="background-color: #4F81BD; color: white; padding: 5px;">Necessary Activation Information</div> <p>To successfully activate your online self-service account, you will need the following pieces of information:</p> <ul style="list-style-type: none"> Federal Employment Identification Number (FEIN) Contact Information Employer Information, including Legal and Physical address Owner/Officer Information <div style="background-color: #4F81BD; color: white; padding: 5px;">Notification</div> <p>All information provided in this filing must be complete, true and accurate. Massachusetts law provides for civil fines and criminal penalties for misrepresentation, evasion, willful nondisclosure, and failure or refusal to furnish reports or requested information to this Agency.</p> <div style="text-align: center; margin-top: 10px;"> <input type="button" value="Next"/> </div>

6. The following page will appear. You will be requested to enter the administrator information. Complete this section and click 'Next' to continue.

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<div style="text-align: right;">* Indicates Required Field</div>	
Logon Employer Registration What's New System Availability User Guide Returning Employer Account Activation	<div style="text-align: center; margin-bottom: 10px;"> 1 → 2 → 3 → COMPLETE <small>Employer Information Business Information Owner/Officer Information</small> </div> <div style="background-color: #4F81BD; color: white; padding: 5px;">Employer Information</div> <div style="display: flex; justify-content: space-between; margin-bottom: 10px;"> <div>Employer Account Number: XXXXXXXXX</div> <div>Employer Name: XXXXXXXXXXXXXXXX</div> </div> <div style="background-color: #4F81BD; color: white; padding: 5px;">Administrator Information</div> <p>To enter information for this employer you must be an <u>authorized administrator</u> of this account. Please enter the following information about yourself:</p> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <div>First Name:</div> <div><input style="width: 150px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Last Name:</div> <div><input style="width: 150px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Phone:</div> <div><input style="width: 150px;" type="text"/></div> <div>ext: <input style="width: 50px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Secondary Phone:</div> <div><input style="width: 150px;" type="text"/></div> <div>ext: <input style="width: 50px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Business Title:</div> <div><input style="width: 150px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Email:</div> <div><input style="width: 150px;" type="text"/></div> </div> </div> <p><input type="checkbox"/> By checking this box, I certify that I am authorized by the owner/officer of this organization to enter employer information. I also certify that I am authorized to function as an Administrator on this account.</p> <div style="text-align: center; margin-top: 10px;"> <input type="button" value="Exit"/> <input type="button" value="Next"/> </div>

- The following page will appear where you will be asked to enter the contact information. Complete the information and click 'Next' to continue.

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COMPLETE

Employer Information
Employer Account Number: xxxxxx Employer Name: xxxxxx

Contact Information
Please enter the following information about the person that should be contacted with questions regarding the initiation of this self-service account.

Same as Administrator: ☒

First Name:

Last Name:

Business Title:

Business Phone: ext:

Secondary Phone: ext:

Email:

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- Continue to enter the business information and click 'Next'.

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Owner/Officer Information
COMPLETE

Employer Information
Employer Account Number xxxxx Employer Name: xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

Communication Method
The following questions are used to gather missing account information:
Please indicate your preferred [Method Of Communication](#) * Email *
Business E-Mail Address:

Business Information
Do you use a [common paymaster](#) *?: ☐ Yes ☐ No *
If yes, enter the FEIN for your common paymaster:
Will this employer act as a [Leasing Company](#) *?: ☐ Yes ☐ No *
Do you have employees that perform services that may be exempt under [Section 6 of MGL 151A](#) *?: ☐ Yes ☐ No *

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- You will be asked to verify your legal address that already exists in the system. Click 'Next' to continue.

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Employer Information Business Information Owner/Officer Information

Employer Information

Employer Account Number: xxxxxx
Employer Name: xxxxxxxxxxxxxxxxx

Legal Address

Please confirm, or make modifications to your [Legal Address](#)®. This address cannot be a Post Office box. Do not enter a client site, other temporary job site, or employee home address.

Address Line 1: *
Address Line 2:
City: *
State: *
Zip Code:
Country: *
Phone: ext:
Fax:
Email:

* Indicates Required Field

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10. The following screen will appear. Complete the requested information and click 'Next' to continue.

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Employer Information Business Information Owner/Officer Information

Employer Information

Employer Account Number: xxxxxx
Employer Name: xxxxxxxxxxxxxxxxx

Massachusetts Physical Location

Does this employer have a [Physical Location](#)® in Massachusetts?(This cannot include a P.O box or client site or employee home address) ☐ Yes ☒ No*

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11. The following screen will appear. Complete the requested information and click 'Next' to continue.

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Employer Information Business Information Owner/Officer Information

Employer Information

Employer Account Number: xxxxxx
Employer Name

Massachusetts Physical Location Address


Please enter, confirm or make modifications to your [MA physical location address](#)®. This address cannot be a Post Office box. Do not enter a client site, other temporary job site, or employee home address.

Same as: *
Address Line 1: *
Address Line 2:
City: *
State: *
Zip Code:
Country: *
Phone: ext:
Fax:
Email:

* Indicates Required Field

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12. The following screen will appear. Complete the requested information and click 'Next' to continue.



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Employer Information Business Information Owner/Officer Information

Employer Information

Employer Account Number: xxxxxx

Employer Name: xxxxxxxxxxxxxxxxx

Add/Modify Owner/Officer Information

Complete the following section. If Owner/Officer is a legally formed entity, please provide: Legal Entity Name and Federal Employer Identification Number.

First Name:

Middle Initial:

Last Name:

SSN:

Legal Entity Name:

FEIN:

Is the owner/officer compensated for their services?: ☐ Yes ☐ No*

Additional Information

For Address fields, enter home address information.

Address Line 1:

Address Line 2:

City:

State:

MA - Massachusetts

Zip Code:

Country:

US - United States Of America

Email:

Business Title:

Select One

Percent of Ownership:

First Date of Ownership:

Add

Reset

If you need to add more owners/officers for this employer, enter the necessary information in the fields below and click on "Add" to save it to the list in the top section of the page. Click "Next" when ownership information is complete. You may not enter more than 5 owner/officers.

Review/Select Owner/Officer Information

Provide the necessary ownership information. As a corporation, you are required to provide 3 owners or enough owners to provide 100% of the existing ownership.

No records found...

If you would like to modify one of the owner/officers for this employer, select it by clicking on the radio button on the left of the column and click "Modify". Clicking on modify will move the selected owner/officer to the table above where the record can be edited. Clicking on "Delete" will inactive the owner/officer and remove the record from the table above.


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Delete

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13. The following screen will appear, confirming that your account activation is complete.



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Employer Information
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Employer Information

Employer Account Number: xxxxxx
 Employer Name: xxxxxxxxxxxxxxxxxx

Activation Complete

Thank you for providing this information. You have successfully initiated your online, self-service account. Please click the Login button to perform system functions, including the following:

- Create your permanent password
- View existing account information
- Manage account(e.g. assign roles, create reporting units)
- Maintain addresses
- File Employment and Wage Detail Reports

Login

14. Upon successfully activating your account, you will receive a permanent user ID and temporary password, by U.S. mail. You will be able to login to your account, using those credentials. If required, please refer to the step by step instructions for initial login in the section 'Logging In and Navigation'.